

BOOK REVIEWS

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Advances in vascular surgery, vol 8

Anthony D. Whittmor; St Louis; 2000; Mosby; 248 pages.

This is the eighth volume in the annual series dedicated to updating practitioners and vascular surgeons on the latest innovations in the field. The editors again have chosen a panel of well-known contributors who have special expertise in the topic they cover. The book is divided into six parts, the first three encompassing the major areas of interest in carotid, aortic, and infringuinal disease. The three remaining parts deal with hemodialysis access, pharmacological intervention for vascular disease, and a basic science update.

In the carotid section, an overview of carotid angioplasty and stenting includes many technical details on the actual performance of the procedure. A discussion about the new cerebral protection devices is timely. This chapter would be useful for a practitioner who is learning to perform carotid angioplasty, but it lacks any details of clinical results. In another chapter, the authors summarize the results of carotid surgery at their institution, and they try to speculate on the future of carotid interventions. A brief discussion on how new devices get investigated and approved by the Food and Drug Administration is quite informative. In the aortic section, the management of pararenal aortic aneurysms is thoroughly reviewed. The chapter is very informative with many tables, angiograms, technical details, and the latest references. The vascular literature is replete with papers on endovascular abdominal aortic aneurysm repair. However, the editors chose to focus on two areas: endovascular repair of ruptured abdominal aortic aneurysms and endoluminal grafts with suprarenal fixation. Although their experience with endovascular repair of ruptured abdominal aortic aneurysms is quite limited (10 patients), the authors describe their new endoprosthesis and given technical details on performing this procedure with reasonable success. The last chapter in this section discusses new devices that could potentially expand indications for endovascular repair of abdominal aneurysms by using transrenal fixation. In the infringuinal disease section, the important topic of functional outcome of patients undergoing bypasses for limb salvage is discussed. Another chapter describing the use of the duplex scan to guide and monitor peripheral angioplasty is included. Both of these chapters represent a fresh look at lower extremity angioplasty and bypass.

The section on hemodialysis is excellent. It covers graft surveillance, management of thrombosed grafts, and technical problems associated with dialysis access. Also, details of how to perform a basilic vein transposition arteriovenous fistula are included. An excellent overview on the management of the vexing problem of steal syndrome after dialysis access is included. The last sections of the book cover the use of cilostazol for the treatment of claudication and the results of clinical trials evaluating lipid-lowering agents. The basic science section comprises an update on matrix metalloproteinases and the regulation of angiogenesis. Both chapters are informative and can be considered a basic overview for busy clinicians who may not be familiar with the latest in basic vascular research.

I found the latest *Advances* to be very useful. It summarizes relevant clinical and basic science information for the reader and includes, for the most part, an adequate bibliography. The use of tables and illustrations, particularly angiograms, is reasonably well annotated and quite helpful. On the other hand, some of the illustrations, specifically in the basilic vein transposition chapter, could have been better. Someone not familiar with the procedure could find it quite

difficult to follow the scanned photographs. The carotid stenting chapters could have been improved by the inclusion of a summary of clinical results of carotid angioplasty. Overall, this book contains updated information on various topics to help the busy clinician.

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Pulmonary embolism. Epidemiology, diagnosis and treatment

Matthijs Oudkerk, Edwin J.R. van Beek, Jan W. ten Cate; Berlin; 1999; Blackwell Science; 469 pages; \$178.95.

We are fortunate that the authors Matthijs Oudkerk, Edwin J. R. van Beek, and Jan W. ten Cate of *Pulmonary Embolism* have compiled a comprehensive review of deep venous thrombosis (DVT) and pulmonary embolism (PE), referring to this clinical copathologic entity as venous thromboembolism. Thromboembolic disease causes a significant health issue in hospitalized patients, which affects not only patients who have undergone surgical and orthopedic procedures, but also those patients afflicted with cardiac, oncologic, traumatic, neurologic, gynecologic, and hematologic disorders as well as the geriatric population. Therefore, it is both advantageous and also incumbent for the clinician, regardless of specialty, to have a thorough understanding of the pathophysiology, natural history, diagnosis, and treatment of venous thromboembolism. *Pulmonary Embolism* provides such a review. Although very readable and containing an extensive reference list that follows each chapter section, this book is intended for the clinical and academic readership as well as for postgraduate senior residents and fellows in training. It is not suitable as an introduction to the complex topic of venous thromboembolic disease for students or junior house staff.

This book is well organized into seven chapters containing 20 sections. It contains an excellent section on epidemiology and natural history of DVT and PE, delineating numerous studies on the risk factors and sequelae. One criticism is that many references to the risks of developing DVT are with relation to studies with radiofibrinogen leg scanning techniques, which are rarely if ever utilized in contemporary DVT diagnostics and clinical studies. This may reflect regional variations or institutional preferences. Major strengths to *Pulmonary Embolism* are the outstanding organization, description, and detail devoted to a comprehensive review of clinical presentation and diagnosis of venous thromboembolism. The diagnosis of venous thromboembolism can be challenging and costly; therefore, appropriate and timely diagnosis becomes critical. It is not surprising then that 11 sections have been devoted to evaluating DVT and PE. These sections are divided into clinical presentation, lower and upper extremity imaging including indications in asymptomatic patients with DVT, and imaging studies for the diagnosis of PE. These sections are well read, detailing each individual diagnostic modality with general and specific information, and this information is clearly and systematically summarized in tabulated charts, greatly facilitating review of an enormous amount of data for the convenience and benefit of the reader. Furthermore, the addition of many excellent illustrations of PE within the pulmonary vasculature are exemplified by ventilation-perfusion scan, pulmonary arteriography, computed tomography, electron beam tomography, and